

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

JAN 10 2002
U.S. PATENT & TRADEMARK OFFICE

		Application Number	09/939871
		Filing Date	08/27/2001
		First Named Inventor	Carl E. Betta et al.
		Group Art Unit	2681
		Examiner Name	
Total Number of Pages in this Submission		Attorney Docket Number	2001-0006

Enclosures (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input checked="" type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input checked="" type="checkbox"/> Additional enclosure(s) (please identify below)
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Copy of Notice to File Corrected Application Papers </div>		
Remarks		

CORRESPONDENCE ADDRESS

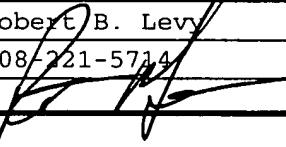
Customer Number or Bar Code Label

Customer Number - 26652

or Correspondence address below

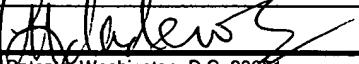
NAME	Samuel H. Dworetzky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Robert B. Levy	Reg. #	28234
TELEPHONE	908-221-5714		
SIGNATURE			
	DATE	12/03/01	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 12/03/01

Type or Printed Name	Relicia Adadevoh		
Signature			
	Date	12/03/01	

SEND TO: Commissioner for Patents, Washington, D.C. 20231

FEE TRANSMITTAL

Patent Fees are subject to annual revision.

TOTAL AMOUNT
OF PAYMENT

\$110

Complete Known	
Application Number	09/939871
Filing Date	08/27/2001
First Named Inventor	Carl E. Betta et al.
Examiner Name	
Group/Art Unit	2681
Attorney Docket No.	2001-0006

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745
 Deposit Account Name AT&T CORP.



- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

FEE CALCULATION**1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	740	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
106	330	Design Filing Fee	
108	740	Reissue Filing Fee	
114	160	Provisional Filing Fee	

SUBTOTAL (1) 0

2. CLAIMS Filing Under 37CFR 1.53 (b)
 CPA Under 37CFR 1.53 (d)
 Amendment

Extra Claims	Fee from below	Fee Paid
Total - 20 =	0	x 18 = 0
Ind. - 3 =	0	x 84 = 0
Multiple Dependent Claims		

Large Fee Code	Entity Fee(\$)	Fee Description
103	18	Claims in excess of 20
102	84	Independent Claims in excess of 3
104	280	Multiple Dependent Claims
109	84	** Reissue independent claims over original patent
110	18	** Reissue claims in excess of 20 and over original patent

** or number previously paid, if greater; for Reissues, see above

SUBTOTAL (2) 0

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112*	920	Requesting publication of SIR prior to Examiner action	
113*	1840	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	110
116	400	Extension for reply within second month	
117	920	Extension for reply within third month	
118	1440	Extension for reply within fourth month	
128	1960	Extension for reply within fifth month	
119	320	Notice of Appeal	
120	320	Filing a brief in support of an appeal	
121	280	Request for oral hearing	
195	300	Publication fee	
140	110	Petition to revive – unavoidable	
141	1280	Petition to revive – unintentional	
142	1280	Utility issue fee (or reissue)	
143	460	Design issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	180	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	
146	740	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	Request for Continued Examination (RCE)	
169	900	Request for expedited exam of a design application	

Other fee (specify):

SUBTOTAL(3) 110

SUBMITTED BY

Typed or Printed Name

Robert B. Levy

Complete (if applicable)

Reg. Number 28234

Signature

Date

12/03/01

Deposit Account User ID

SEND TO: Commissioner for Patents, Washington, D.C. 20231